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|                      | Class | Subclass |
| ISSUE CLASSIFICATION |       |          |

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PATENT NUMBER

U.S. **UTILITY** Patent Application

① FF O.I.P.E. PATENT DATE  
SCANNED AA Q.A. 18

|                              |                   |                  |                  |                       |                       |
|------------------------------|-------------------|------------------|------------------|-----------------------|-----------------------|
| APPLICATION NO.<br>09/530447 | CONT/PRIOR<br>D F | CLASS<br>280 428 | SUBCLASS<br>34.1 | ART UNIT<br>36.1 1772 | EXAMINER<br>Patterson |
|------------------------------|-------------------|------------------|------------------|-----------------------|-----------------------|

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PTO-2040  
12/99

**ISSUING CLASSIFICATION**

[illegible]

|   |                                       |              |                                   |              |
|---|---------------------------------------|--------------|-----------------------------------|--------------|
| <input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>   | <b>DRAWINGS</b>                       |              | <b>CLAIMS ALLOWED</b>             |              |
|   | Sheets Drwg.                          | Figs. Drwg.  | Print Fig.                        | Total Claims |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  | _____<br>(Assistant Examiner)         |              | <b>NOTICE OF ALLOWANCE MAILED</b> |              |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____<br>_____<br>_____ | _____<br>(Primary Examiner)           |              | <b>ISSUE FEE</b>                  |              |
|   | _____ (Date)                          |              | Amount Due                        | Date Paid    |
| <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.   | _____<br>(Legal Instruments Examiner) |              | <b>ISSUE BATCH NUMBER</b>         |              |
|   |                                       | _____ (Date) |                                   |              |

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